Barbara Campbell
National Stage Processing
(703) 305-3631

# MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
## (FOR USE WITH FORM PTO-875)

SERIAL NO. **09/423943**   APPLICANT(S)   FILING DATE

## CLAIMS

| Claim | AS FILED IND. | AS FILED DEP. | AFTER 1st AMENDMENT IND. | AFTER 1st AMENDMENT DEP. | AFTER 2nd AMENDMENT IND. | AFTER 2nd AMENDMENT DEP. |
|---|---|---|---|---|---|---|
| 1 | 1 | | | | | |
| 2 | | 1 | | | | |
| 3 | 1 | | | | | |
| 4 | | 1 | | | | |
| 5 | | 2 | | | | |
| 6 | | 2 | | | | |
| 7 | | 2 | | | | |
| 8 | | 2 | | | | |
| 9 | | 2 | | | | |
| 10 | | 2 | | | | |
| 11 | | 2 | | | | |
| 12 | | 2 | | | | |
| 13 | | 2 | | | | |
| 14 | | 2 | | | | |
| 15 | | 1 | | | | |
| 16 | | 3 | | | | |
| 17 | | 3 | | | | |
| 18 | | 3 | | | | |
| 19 | | 3 | | | | |
| 20 | | 3 | | | | |
| 21 | | 2 | | | | |
| 22 | | 2 | | | | |
| 23 | | 2 | | | | |
| 24 | | 2 | | | | |
| 25 | | 2 | | | | |
| 26 | | 2 | | | | |
| 27 | | 2 | | | | |
| 28 | | 2 | | | | |
| 29 | 1 | | | | | |
| 30 | | 1 | | | | |
| 31 | 1 | | | | | |
| 32 | 1 | | | | | |
| 33 | | 3 | | | | |
| 34 | | 3 | | | | |
| 35 | | 3 | | | | |
| 36 | | 3 | | | | |
| 37 | | 3 | | | | |
| 38 | | 3 | | | | |
| 39 | | 3 | | | | |
| 40 | | 3 | | | | |
| 41 | | 3 | | | | |
| 42 | | 3 | | | | |
| 43 | | 1 | | | | |
| 44 | | 3 | | | | |
| 45 | | 2 | | | | |
| 46 | | 2 | | | | |
| 47 | | 3 | | | | |
| 48 | | 3 | | | | |
| 49 | | 3 | | | | |
| 50 | | 3 | | | | |
| TOTAL IND. | | | | | | |
| TOTAL DEP. | | | | | | |
| TOTAL CLAIMS | | | | | | |

| Claim | * IND. | * DEP. | * IND. | * DEP. | * IND. | * DEP. |
|---|---|---|---|---|---|---|
| 51 | | 3 | | | | |
| 52 | | 3 | | | | |
| 53 | | 3 | | | | |
| 54 | | 3 | | | | |
| 55 | | 3 | | | | |
| 56 | | 3 | | | | |
| 57 | 1 | | | | | |
| 58 | | 1 | | | | |
| 59 | | 1 | | | | |
| 60 | | 1 | | | | |
| 61 | | 1 | | | | |
| 62 | | 1 | | | | |
| 63 | | 1 | | | | |
| 64 | | 1 | | | | |
| 65 | | 1 | | | | |
| 66 | | 1 | | | | |
| 67 | | 1 | | | | |
| 68 | | 1 | | | | |
| 69 | | 1 | | | | |
| 70 | | 1 | | | | |
| 71 | | 1 | | | | |
| 72 | | 1 | | | | |
| 73 | | 1 | | | | |
| 74 | | 1 | | | | |
| 75 | | 1 | | | | |
| 76 | 1 | | | | | |
| 77 | | 1 | | | | |
| 78 | 1 | | | | | |
| 79 | 1 | | | | | |
| 80 | | 3 | | | | |
| 81 | | 3 | | | | |
| 82 | | 3 | | | | |
| 83 | | 3 | | | | |
| 84 | | 3 | | | | |
| 85 | | 3 | | | | |
| 86 | | 3 | | | | |
| 87 | | 3 | | | | |
| 88 | | 3 | | | | |
| 89 | | 3 | | | | |
| 90 | | 1 | | | | |
| 91 | | 3 | | | | |
| 92 | | 2 | | | | |
| 93 | | 2 | | | | |
| 94 | | 3 | | | | |
| 95 | | 3 | | | | |
| 96 | | 3 | | | | |
| 97 | | 3 | | | | |
| 98 | | 3 | | | | |
| 99 | | 3 | | | | |
| 100 | | 3 | | | | |
| TOTAL IND. | | | | | | |
| TOTAL DEP. | | | | | | |
| TOTAL CLAIMS | | | | | | |

Barbara Campbell

PTO-1360 (3-78)   *MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS   U.S. DEPARTMENT of COMMERCE Patent and Trademark Office

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# MULTIPLE DEPENDENT CLAIM
# FEE CALCULATION SHEET
### (FOR USE WITH FORM PTO-875)

**SERIAL NO.** 09/423943  **FILING DATE**

**APPLICANT(S)**

## CLAIMS

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | | * | | * | | * | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. | | | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 101 | | 3 | | | | | | 51 | | | | | | |
| 102 | | 3 | | | | | | 52 | | | | | | |
| 103 | | 3 | | | | | | 53 | | | | | | |
| 104 | 1 | | | | | | | 54 | | | | | | |
| 105 | | 1 | | | | | | 55 | | | | | | |
| 106 | | 1 | | | | | | 56 | | | | | | |
| 107 | | 1 | | | | | | 57 | | | | | | |
| 108 | | 1 | | | | | | 58 | | | | | | |
| 109 | | 1 | | | | | | 59 | | | | | | |
| 110 | | 1 | | | | | | 60 | | | | | | |
| 111 | | 1 | | | | | | 61 | | | | | | |
| 112 | | 1 | | | | | | 62 | | | | | | |
| 113 | | 1 | | | | | | 63 | | | | | | |
| 114 | | 1 | | | | | | 64 | | | | | | |
| 115 | | 1 | | | | | | 65 | | | | | | |
| 116 | | 1 | | | | | | 66 | | | | | | |
| 117 | | 1 | | | | | | 67 | | | | | | |
| 118 | | 1 | | | | | | 68 | | | | | | |
| 119 | | 1 | | | | | | 69 | | | | | | |
| 120 | | 1 | | | | | | 70 | | | | | | |
| 121 | | 1 | | | | | | 71 | | | | | | |
| 122 | | 1 | | | | | | 72 | | | | | | |
| 123 | | | | | | | | 73 | | | | | | |
| 124 | | | | | | | | 74 | | | | | | |
| 125 | | | | | | | | 75 | | | | | | |
| 126 | | | | | | | | 76 | | | | | | |
| 127 | | | | | | | | 77 | | | | | | |
| 128 | | | | | | | | 78 | | | | | | |
| 129 | | | | | | | | 79 | | | | | | |
| 130 | | | | | | | | 80 | | | | | | |
| 131 | | | | | | | | 81 | | | | | | |
| 32 | | | | | | | | 82 | | | | | | |
| 33 | | | | | | | | 83 | | | | | | |
| 34 | | | | | | | | 84 | | | | | | |
| 35 | | | | | | | | 85 | | | | | | |
| 36 | | | | | | | | 86 | | | | | | |
| 37 | | | | | | | | 87 | | | | | | |
| 38 | | | | | | | | 88 | | | | | | |
| 39 | | | | | | | | 89 | | | | | | |
| 40 | | | | | | | | 90 | | | | | | |
| 41 | | | | | | | | 91 | | | | | | |
| 42 | | | | | | | | 92 | | | | | | |
| 43 | | | | | | | | 93 | | | | | | |
| 44 | | | | | | | | 94 | | | | | | |
| 45 | | | | | | | | 95 | | | | | | |
| 46 | | | | | | | | 96 | | | | | | |
| 47 | | | | | | | | 97 | | | | | | |
| 48 | | | | | | | | 98 | | | | | | |
| 49 | | | | | | | | 99 | | | | | | |
| 50 | | | | | | | | 100 | | | | | | |
| TOTAL IND. | 10 | | | | | | | TOTAL IND. | | | | | | |
| TOTAL DEP. | 228 | | | | | | | TOTAL DEP. | | | | | | |
| TOTAL CLAIMS | 238 | | | | | | | TOTAL CLAIMS | | | | | | |

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